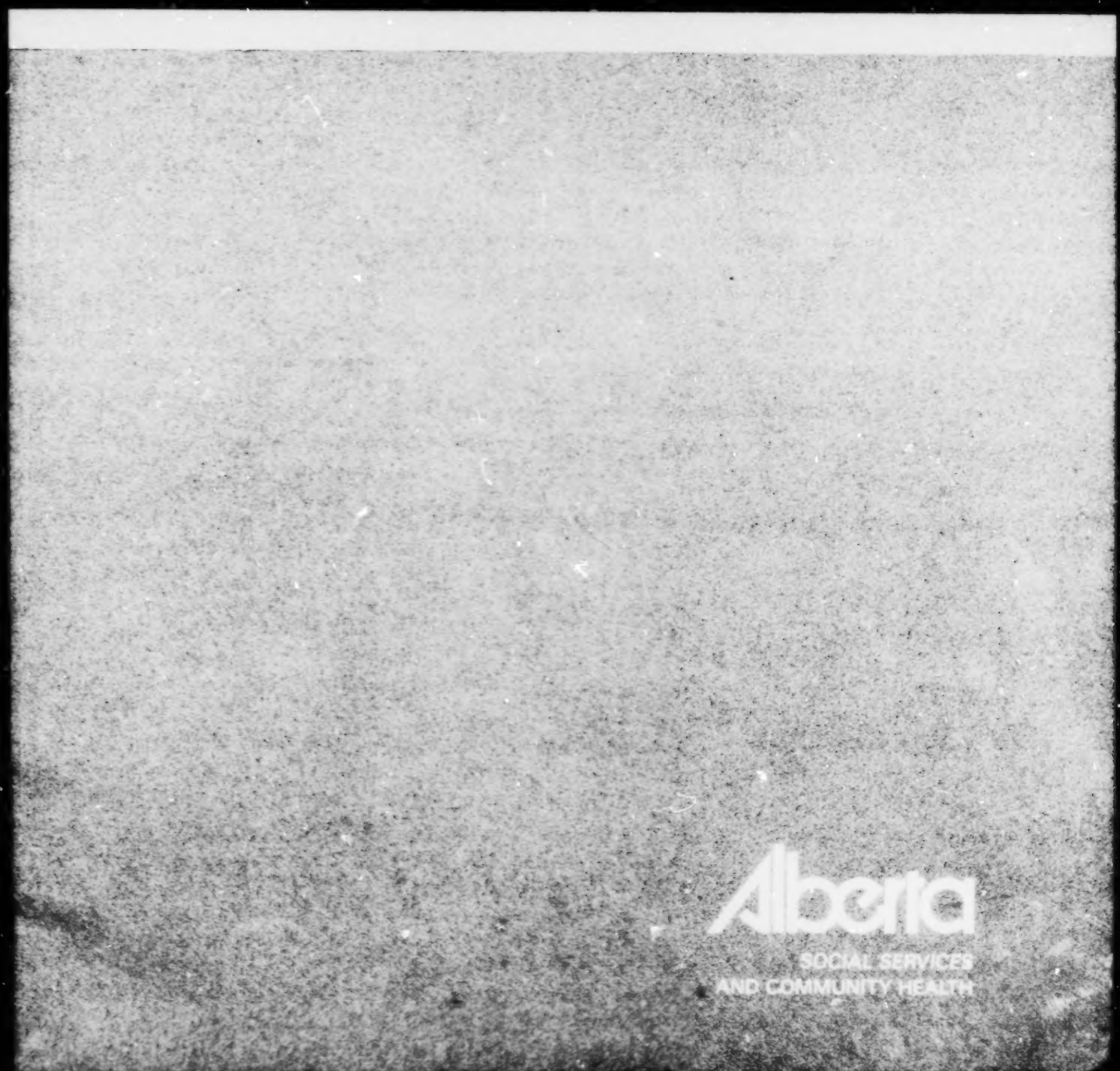
ANNUAL REPORT
1983-1984



Alberta

SOCIAL SERVICES
AND COMMUNITY HEALTH

85-0486/

Alberta
SOCIAL SERVICES AND
COMMUNITY HEALTH

Office of the Minister

424 Legislature Building, Edmonton, Alberta, Canada T5K 2B6 403/427-2606

EDMONTON, ALBERTA
October 1984

TO THE HONOURABLE G. AMERONGEN
Speaker of the Legislative Assembly

Sir:

I have the honour to present the fourteenth annual report of Alberta Social Services and Community Health, which covers the fiscal year ending March 31, 1984.

Respectfully submitted,

Neil Webber

Neil Webber
Minister of Social Services
and Community Health

85-0486/

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SOCIAL SERVICES
AND COMMUNITY HEALTH

Seventh Street Plaza, 10030 - 107 Street, Edmonton, Alberta, Canada T5J 3E4

In Replying Please Quote

October 1984

HONOURABLE NEIL WEBBER
Minister of Social Services
and Community Health

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We have the honour to present the fourteenth annual report of Alberta Social Services and Community Health, which covers the fiscal year ending March 31, 1984.

Respectfully submitted,

David S. Kelly
Acting Deputy Minister
Health Services

Michael J. Ozerkevich
Deputy Minister
Social Services

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Health Services Division

Health Services Division

The Health Services Division exists to monitor the state of public health and to develop and support programs and services which help achieve, maintain and restore the good health and well-being of the people of the province. The Division's goal is the prevention of illness and the promotion of good physical, mental and social health.

The Division's purpose is accomplished primarily by enabling Alberta communities, within a developing framework of provincial policy, to identify and meet their own needs. Division activities include controlling communicable diseases, helping to keep the physical and social environment safe, providing care for children, promoting healthy lifestyles, and providing ways for people to maintain their independence whenever possible.

During 1983-84 the Health Services Division responded to the climate of economic restraint and deregulation by:

- reviewing its methods for funding local authorities and agencies
- re-shaping programs in order to increase the effective use of resources and improve the quality of services to the public
- increasing attention to the joint planning of services with allied health agencies
- developing strategies for streamlining regulatory and administrative functions

These initiatives produced results such as the final drafting of Bill 25, the Public Health Act, the redesign of the Aids to Daily Living and Extended Health Benefits programs, the re-shaping of the Mental Health Services delivery system, and the development of a new surplus and deficit policy for the funding of local health authorities.

The activities and highlights of program and support branches within the Division for the 1983-84 fiscal year follow.

PROFESSIONAL SERVICES BRANCH

The Professional Services Branch provides the direction, coordination and integration of six program areas: Health Promotion and Protection Programs, Rehabilitative Programs, Communicable Disease Control and Epidemiology, Family and Community Support Services, Day Care, and Mental Health.

The Branch manages the direct delivery of some services, and provides program support where delivery is not a divisional responsibility.

HEALTH PROMOTION AND PROTECTION

Health Promotion and Protection Program's personnel foster and support the development and delivery of programs designed to prevent health problems and to enhance, maintain, protect and restore the health and well-being of people in Alberta.

Health Promotion and Protection Programs also play a role in coordinating and linking programs offered by local health authorities, and other government and non-governmental (including voluntary) organizations.

Community Health Nursing

The purpose of this unit is to ensure the highest standard of community health nursing services are available for the people of Alberta.

Services to local health authorities include providing expertise on community health nursing and family health programs and resource and program support. Direct service, including emergency and minor treatment, is provided in the Worsley area in northwest Alberta.

Highlights

- Continued coordination on a provincial basis through the Standing Committee on Community Health Nursing which led to the development of: a Childhood Injury/Accident Prevention Proposal; a draft of Family Health Standards for Seniors' and Infants' programs; and discussion papers on Early Postnatal Discharge Programs and Community Health Nursing programming for adults.
- Produced various publications including a pamphlet on Genetic Counselling through the Alberta Hereditary Diseases Program, and the Nursing Forms Manual; a series of pamphlets for parents of preschoolers; and the Compendium of Health Education Resources (in cooperation with Health Education and Promotion).

- Presented "The Computer Connection" workshop for 75 community health nursing managers.
- The local health authorities' community health nursing services in 1983 were primarily targeted to the younger age groups (Proportion of staff time: Infants - 30 per cent, School - 27 per cent, Preschool - 21 per cent, Adults - 17 per cent and Seniors - seven per cent).

SELECTED STATISTICS –
COMMUNITY HEALTH NURSES' CONTACT WITH THE CLIENTS - ALBERTA LOCAL HEALTH AUTHORITIES

Contacts with prenatal women	35,000
Home visits following birth	39,000
Contacts	
- with handicapped children	5,600
- with senior citizens	100,000
- re: communicable diseases	152,000
Immunizations	
- total	419,000
- measles	105,000
Screenings	
- for preschoolers	133,000
- for students	175,000
Attendees	
- health education	330,000
- prenatal classes	62,500
- family life education	60,000
Tuberculin tests	28,000

Dental Health Services

The purpose of Dental Health Services is to monitor the state of oral health and to develop and support dental programs and services which help achieve, maintain and/or restore the oral health of the people of Alberta. The main goal is to prevent dental disease.

Highlights

- Operated mobile dental trailers in Milk River, Spirit River, Bassano, Coronation, Wabasca/Desmarais, Swan Hills and Bow Island.
- Expanded the Visiting Dentist Program and held clinics in 10 remote locations for a total of 164 days.

Environmental Health Services

This program represents the major protection aspect of the Health Promotion and Protection Programs.

Environmental Health Services employs various specialists to investigate environmental health matters in the province. These specialists provide advice, information and training on environmental health issues and the enforcement of Provincial Board of Health regulations to local public health inspectors. A seminar on environmental health law was held in 1983-84.

This program also provides secretariat services to the Provincial Board of Health and works closely with the departments of Environment, Agriculture, and Workers' Health, Safety and Compensation.

Highlights

- Represented Alberta on: Federal/Provincial Advisory Committee on Environmental and Occupational Health; Federal/Provincial Advisory Committee on Indoor Air Quality; and Federal/Provincial Private Industry Advisory Committee on updating educational programs for foodhandlers.
- Conducted an investigation into an outbreak of *Pseudomonas folliculitis* in the province, which resulted in the cancellation of earlier approval by the Provincial Board of Health for the use of bromination to disinfect whirlpools.
- Participated in the Federal/Provincial Study Group on Hot Tubs and Whirlpools.
- Coordinated preparatory activities for the Lodgepole Inquiry and provided direct testimony at the Inquiry proceedings.
- Sponsored a non-governmental working group: The Steering Committee for the Revision of the Recommended Swimming Pool Design and Operating Standards.
- Published a scientific research paper: "A Retrospective Comparison of the Effectiveness of Bromination and Chlorination in Controlling Pseudomonas Aeruginosa in Spas (Whirlpools) in Alberta", in the *Canadian Journal of Public Health*.

Health Education and Promotion Services

This program represents the major promotion aspect of Health Promotion and Protection Programs.

Health Education and Promotion Services hold a key position in the linkage, coordination and development of a broad range of family planning, health education and promotion programs in Alberta.

Staff specialists provide consultation in the areas of program management and development, health education process, resource assessment and development, professional inservice education and content specific to family planning and lifestyle related behaviors.

Highlights

- Represented Alberta on:
  - Federal/Provincial Advisory Committee on Community Health Services (June 1983)
  - Hosted Federal/Provincial Meeting on Family Planning (June 1983)
  - Federal/Provincial Advisory Committee on Health Promotion (Nov. 1983)
  - Federal/Provincial Task Force on Family Planning and Social Implications for Adolescent Mothers (Nov. 1983)
  - Federal/Provincial Task Force on Family Planning Training (Jan. 1984)
  - Alberta-British Columbia Self Care Network Advisory Committee.
- Represented Department on:
  - Curriculum Coordinating Committee for Elementary and Secondary School Health and Physical Education
  - Planning Committee for Health Symposium '83.
- Developed and implemented a province-wide Family Planning Information System.
- Published a Family Planning Needs Assessment Manual and assisted with specific needs assessments in conjunction with Alberta West Central and Minburn-Vermillion Health Units.
- Published "The Stork Didn't Bring You" - a communication guide on sexuality for parents of children from birth to eight years of age.
- Coordinated seven training workshops throughout the province for family planning professionals.

Nutrition Health Services

Nutrition Health Services provides professional support and input to all community-based nutrition programs. This is accomplished through the personnel in local health authorities, members of community agencies, and personnel responsible for departmental programs and facilities. As well, relevant program areas in other government departments and educational institutions are supported.

Throughout the year, the committed aspects of the program were continued. These included consultation, preparation and distribution of the newsletter, "Nutritionally Speaking," review and update of educational resources, and development of new pamphlets and teaching aids.

Highlights

- Hosted meeting of the Federal/Provincial Subcommittee on Nutrition.
- Conducted a pilot test of an activity-based data collection instrument with the cooperation of community health nutritionists employed in local health authorities.
- Completed and distributed the report of an intradepartmental working party entitled, "Measurement of Childhood Growth: A Handbook."
- Coordinated the response of community health nutritionists to the Health and Welfare Canada proposal on Nutrition Labelling.

REHABILITATIVE PROGRAMS

The mandate of Rehabilitative Programs is to strengthen the independent living skills and health status of Albertans. This is accomplished by evaluating, developing, supporting and in one instance, providing community rehabilitation programs.

The following units are under Rehabilitative Programs: Alberta Aids to Daily Living, Coordinated Home Care Program, Speech Pathology and Audiology, and Early Intervention Program.

Alberta Aids to Daily Living

This program is designed to meet the special needs of handicapped or chronically ill Albertans facing the cost of obtaining necessary medical equipment and supplies. This equipment, available without charge, includes wheelchairs, walking aids, home oxygen equipment, hearing aids, prosthetics, orthotics and various medical/surgical products. Alberta Aids to Daily Living Program (AADL) coordinates the supply of equipment to those requiring it through the development of assessment and follow-up procedures which ensures individuals receive the appropriate aid or device. The evaluation of equipment and supplies is also carried out by the program.

The Extended Health Benefits Program (EHB) is similar to the AADL Program; however, it serves senior citizens who have chronic disabling health conditions.

By providing equipment and supplies, the AADL and EHB programs assist many handicapped or chronically ill Albertans to remain in their homes. Approximately 34,000 Albertans were assisted by AADL and 49,000 by EHB programs in 1983-84.

Highlights

- Completed an extensive review of the AADL and EHB programs which resulted in major design changes including expanding the role of the authorizer to include EHB client assessments, development of new pricing structures, and changes to internal administrative structures and procedures.

Coordinated Home Care Program

The Coordinated Home Care Program provides medical and support services to Albertans, primarily to the elderly (80 per cent of the caseload is 65 years and older), the chronically ill and handicapped persons. The average monthly caseload was slightly over 7,000 for 1983-84.

Highlights

- Launched the development of a client outcome focused Quality Assurance Program for home care programs.
- Started local computerization for the Home Care Information System in local health authorities.
- Participated in the development of an assessment and placement model for long term services in Alberta.
- Announced a $10 million (55 per cent) expansion to the Home Care Program, beginning in 1984-85, which will provide an expanded medical entry point for the elderly, additional and expanded palliative care services, maintenance of the medical entry point and completion of geographical coverage, where feasible, throughout Alberta.

Speech Pathology and Audiology

This program provides approximately one-third of all speech therapy services in Alberta through local health authorities.

Speech Pathology services are provided to a wide range of individuals with speech, language or hearing disorders, but priority is given to children.

In addition to the financial support for speech pathology programs, the Department provides consultative planning and evaluation services to local health authorities through the Speech Pathology and Audiology Unit. This unit also provides consultative services to other divisions of the Department and serves as a liaison with the Department of Education, and Hospitals and Medical Care, professional associations, agencies and the public.

In 1983-84, local health authorities received 4,690 new referrals for speech pathology services. Provided services included: 6,485 assessments and follow-up reviews and treatment of 2,766 patients. Of all patients being served by the programs, 3,836 were discharged. Additionally, the programs provided a total of 5,596 hearing assessments and 553 public education programs.

Highlights

- Monitored the operations of the Computerized Records System for Speech Pathology (CRISSP) and initiated a user evaluation of the system. CRISSP provides a standard method of data collection for planning and evaluating speech pathology programs by local health authorities and the Department.
- Continued in a three-year joint project of local health authorities and the Department to develop formal structure, process and outcome standards applicable to Alberta Community Health Speech Pathology programs.
- Implemented a formalized process for joint planning, scheduling, and evaluating of consulting services provided by the Speech Pathology and Audiology Unit to local health authorities.

Early Intervention Program

The Early Intervention Program in Alberta was established to provide professional support in the home for developmentally-delayed children aged 0 to 3½ years and their families. The program is based on the theory that early support will help the family to adapt to the handicap and assist in increasing the child's development.

Examples of children presently participating in the program are those with diagnoses of Downs Syndrome, Cerebral Palsy, or a severe sensory handicap (i.e. blind, deaf, multi-handicapped, mentally handicapped).

Programs operating in Alberta are administered by local health authorities, school boards, and voluntary associations. The average number of children receiving services in the program per month was 235.

COMMUNICABLE DISEASE CONTROL AND EPIDEMIOLOGY

Communicable Disease Control and Epidemiology monitors the occurrence of infectious diseases in Alberta through three units: Epidemiology and Disease Control, Social Hygiene Services, and

Tuberculosis Services. These units maintain surveillance of communicable diseases throughout the province, identify problems needing intervention, and provide assistance or services required to control these problems.

Highlights

- Implemented, with local health authorities, the measles elimination program introduced in 1982. The program was designed to eliminate cases of measles acquired in Alberta.
- Introduced updated regulations concerning the control of communicable diseases in June 1983.
- Expanded the hepatitis B immunization program to cover more of those at risk of infection.
- Refined and upgraded the general immunization program.
- Improved the program to prevent meningitis cases occurring in day care centres.

Epidemiology and Disease Control

This unit is responsible for communicable diseases other than sexually transmitted diseases and tuberculosis. It monitors the incidence of these diseases and ensures appropriate preventive or control measures are taken to minimize the impact of such diseases. Consultation and advice are provided to local health authorities, hospitals, physicians and other government departments.

Reports of selected communicable diseases (notifiable diseases), which have impact because of their severity, risk of spread or the number of people they affect, are required under the Communicable Disease Control Regulations. The statistics generated from these reports serve as a basis for epidemiologic reports to practicing physicians and local health authorities in the province. As well data are exchanged with neighboring jurisdictions and are transmitted to Statistics Canada and eventually to the World Health Organization. This information then becomes part of the national and worldwide surveillance of disease.

Notifiable Diseases.

Two striking features were observed in the 1983 notifiable disease picture.

The first was a dramatic increase in the incidence of rubella to the highest levels recorded since 1975. The disease has a 3-9 year periodicity so that the high incidence in 1983 was not unexpected. Although over 80 per cent of cases occurred in children, adults were also affected and there were over 40 documented infections in pregnant women. Active media coverage of the outbreak resulted in increased awareness of the risk to unprotected women and many received vaccine.

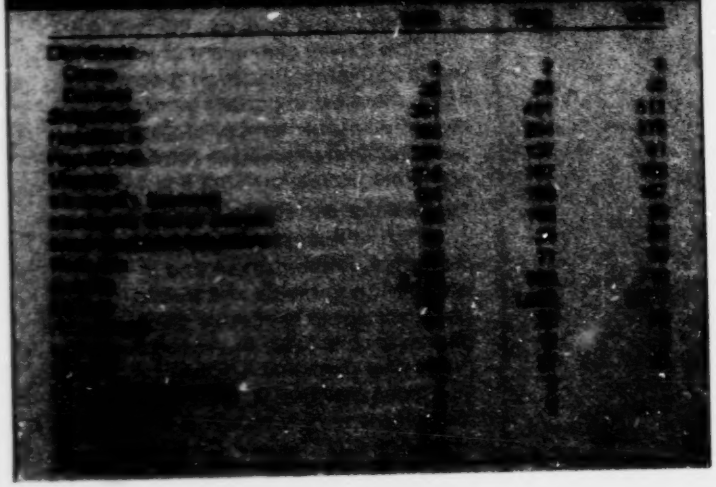
The second most commonly reported disease in 1983 was infection with Giardia lamblia, a parasite which produces an unpleasant diarrheal illness, colloquially known as "beaver fever". Although the disease only became officially notifiable in the latter half of 1983, 517 cases were reported. Combined with over 900 cases recognized in an outbreak in the City of Edmonton in January to March 1983, giardiasis was the second most commonly reported disease in 1983 (excluding sexually transmitted diseases).

The first case of AIDS (acquired immunodeficiency syndrome) a severe, ultimately fatal disease in which a presumed viral agent destroys the person's immune defenses was reported in Alberta in 1983 and received considerable publicity.

Part of the increase in the incidence of measles was due to greater awareness and better reporting of the disease because of the measles elimination program while part of this increase also resulted from the incorrect diagnosis of cases of rubella. Only 16 cases of measles were documented by laboratory tests and less than 50 met the strict criteria for diagnosis.

The City of Drumheller experienced an outbreak of diarrheal illness which affected over 3,000 people during a one

CASES OF SELECTED NOTIFIABLE DISEASES BY CALENDAR YEAR



week period in February 1983. While the cause was never documented, the source of the outbreak was clearly water.

Statistics for selected notifiable disease with comparisons to previous years are shown in the table on page 7. Malaria and leprosy have declined sharply from the levels seen in 1981 and 1982 and reflect the decrease in arrival of refugees. The incidence of typhoid fever has remained constant. The previously recognized progressive increase in incidence of hepatitis B continued in 1983.

An unusual form of infection producing bloody diarrhea and a form of kidney failure was reported in 33 persons in 1983. This diarrhea, due to *E. coli 0157:H7*, has only recently been recognized and is associated with inadequately cooked meat. Alberta has had the highest reported incidence of sporadic cases of any jurisdiction.

Immunization.

As in past years the branch provided a wide range of immunizing agents to local health authorities for the prevention of communicable diseases. Over 200,000 Albertans received more than half a million immunizations.

The protection of children against seven diseases (diphtheria, whooping cough, tetanus, polio, measles, mumps and rubella) remained the primary goal of the program and a further improvement in the better than 90 per cent coverage achieved in 1982 is expected.

As well, immunization for groups at special risk continued. For example 637 persons received rabies vaccine because of possible occupational exposure and 47 persons received rabies vaccine because of exposure to proven or suspected rabid animals.

There were significant changes made to the immunization program in 1983, the most important being the reduction in the number of doses of polio vaccine required to provide complete protection from 6 to 4 doses.

Professional and Public Education.

Staff of the branch were active in promoting immunization and in responding to media and public enquiries about infectious diseases. Staff participated actively in the teaching of preventive medicine, epidemiology and infectious diseases to undergraduates in medicine and nursing at the universities of Alberta and Calgary. Staff also participated in Continuing Medical Education programs throughout the Province.

Social Hygiene Services

The goal of Social Hygiene Services is to provide a comprehensive program for the control of sexually transmitted diseases. The program provides diagnostic and treatment services through clinics located in Edmonton, Calgary and Lethbridge, epidemiologic services, consultation to physicians, data monitoring, disease surveillance, and public and professional education.

The Diseases.

Surveillance is maintained for the four notifiable diseases: gonorrhea, syphilis, chancroid and lymphogranuloma venereum.

A dramatic decrease in both the number of cases and rate for gonorrhea occurred in 1983; just over 8,000 cases were reported giving a rate of 339.7 per 100,000 population. This is almost a 30 per cent decline from the 1982 figures. However this situation was offset by a 36 per cent rise in the incidence of syphilis. The increase was confined to cases of infectious syphilis with the outbreak being localized in the Edmonton area. Activities to control this outbreak have required a major portion of the Edmonton clinic's time and manpower. Although non-reportable infections, non-gonococcal urethritis and genital herpes continue to be a cause for concern both for health care professionals and the public; laboratory testing for these conditions remained at high levels in the clinics.

There were no reported cases for chancroid and lymphogranuloma venereum.

Highlights

- The Calgary clinic moved to new quarters in October 1983. More space with an improved design will ensure better patient services and staff working conditions.
- Despite the large drop in gonorrhea incidence the clinics continue to be well utilized. The Edmonton and Calgary clinics averaged 300 patient visits per week.
- Over 50 per cent of the 549 educational presentations were given to students in secondary schools, an important target group due to the high incidence of gonorrhea in young people.
- In February 1983 a public awareness campaign was held, using the media formats of posters, bus cards and television advertising.

Tuberculosis Services

The monitoring and control of tuberculosis in the Province of Alberta is the responsibility of the Tuberculosis Services Branch. It operates an out-patient clinic in Calgary and another in Edmonton. Tuberculosis projects in Edmonton and Lac La Biche are monitored by Tuberculosis Services. A Central Tuberculosis Registry for the province is maintained in Edmonton.

Persons having shown positive tuberculin reactions may be investigated by their family physician or referred to the Tuberculosis Services Clinics. The Tuberculosis Clinics provide these individuals with further investigations, treatment and follow-up as well as supplying anti-tuberculosis medication free of charge.

There were 189 active cases of tuberculosis detected in Alberta in 1983, a modest decrease from the 211 reported in 1982. Of the 189 cases, 64 (33.9 per cent) were foreign born and almost certainly acquired their infections before coming to Canada. Most of the foreign born (35) came from Asia during the last five years. Their average age at the time of diagnosis was 37 years. The other large group of 23 came from Europe. They had been in Canada for many years (average - 40 years) and their average age at the time of diagnosis was 66 years. The Canadian born cases were divided into Registered Indians (49 or 26 per cent), Metis (25 or 13.2 per cent), and all others (51 or 27 per cent).

In addition to monitoring and providing treatment for active cases, Tuberculosis Services ensures follow-up of contacts of cases and provides free medication for the prevention of tuberculosis in those at risk. There were 890 such persons provided with medications in 1983.

DAY CARE

The Day Care Program supports the delivery of appropriate day care services in Alberta communities, ensures that standards of care are maintained and improved, and encourages the use of day care as a preventive social service by providing financial support to day care centres, family day home agencies and individual families. The program is also responsible for interpretation and development activities for the Social Care Facilities Licensing Act.

Corporate program staff have responsibility for policy development, program planning and evaluation.

Regional day care staff are responsible for service delivery, which includes licensing and consultation to day care centres, family day homes and nursery schools for pre-school children. They also license foster homes, residential treatment centres for children and adults, adult homes for special care and after school programs for older children, subject to the provisions of the Social Care Facilities Licensing Act. The table on page 10 provides a statistical summary on the licensing function.

Highlights

- Developed a brochure "Choosing Day Care - A Parent's Guide" to assist parents to choose day care services appropriate to their needs and the needs of their children. A series of six posters illustrating various aspects of child development was made available to day care services, health units, and other agencies serving children and families.
- Responsibility for policy development and program planning for children with special needs in day care was transferred to the Day Care Program in July 1983.
- Combined Family Subsidy and Operating Allowance Forms were designed to provide a simpler method of invoicing and to reduce administrative costs.
- A study was made to assess the availability of day care manpower and training levels in the Province.
- An inventory is now maintained for day care spaces and occupancy rates, and a system for forecasting day care demand has been designed.
- The Day Care Society of Alberta received funding for the Day Care Worker Training Certificate Program, an in-service training program for day care workers.

DAY CARE PROGRAM STATISTICS

	[illegible]		[illegible]		[illegible]	
	NUMBER OF FACILITIES	LICENSED CAPACITY	NUMBER OF FACILITIES	LICENSED CAPACITY	NUMBER OF FACILITIES	LICENSED CAPACITY
Day Care Centres	442	20,255	477	21,989	34	1,695
Licensed Family Day Homes	65	349	58	316	-8	-33
Satellite Family Day Homes*	667**	1,335***	1,215**	2,431***	548**	1,096***
Nursery Schools	348	7,857	364	8,288	16	431
Program for School Age Children	129	2,783	186	3,585	57	802
Adult Homes for Special Care	169	4,673	195	4,960	26	287
Children's Institutions	166	2,303	173	2,307	7	0
Foster Homes	151	735	142	703	-9	-32
Social Care	39	201	35	180	-4	-21

* Under contract, not licensed
** Based on an average of 2 children per home
*** Based on actual enrollment.

FAMILY AND COMMUNITY SUPPORT SERVICES

The objective of the Family and Community Support Services Program is to prevent social breakdown by helping people and their community identify and provide solutions for their social needs.

Municipalities, improvement districts, metis settlements, Indian Bands, and National Parks may enter into their own agreement with the Minister of Social Services and Community Health to operate a local Family and Community Support Services Program. Funding is provided on a cost-shared basis with the province contributing up to 80 per cent of the fund and the local municipality or municipalities contributing the remaining 20 per cent.

Highlights

- During 1983-84, municipal-provincial agreements were in effect with municipal programs serving 85 per cent of the province's population.
- Consulting services associated with the program are provided by the regions of the Department.
- 1983-84 funds to municipalities were allocated as follows:

Administration and Planning Component	$ 4,202,112
Family and Community Services Components	21,030,309
	(25,232,421)

MENTAL HEALTH PROGRAM

The Mental Health Program is responsible for:

- Providing a leadership role and maintaining a provincial mental health service identity.
- Identifying provincial mental health needs and planning with regions and other departments to meet those needs.
- Monitoring and evaluating mental health programs.
- Participating in policy development.
- Ensuring the maintenance of the highest possible standards of care.
- Operating and maintaining the Mental Health Information System.
- Operating suicide prevention programs.

Highlights

- Worked with the Department of Hospitals and Medical Care on review of the *Southern Alberta Study of Psychiatric Needs and Provisions* (Clarke Report).
- Received the *Report of the Task Force to Review the Mental Health Act* (Drewry Report) and commenced, jointly with Hospitals and Medical Care, study of the report.
- Developed a liaison with the local health authorities on preventive mental health.
- Supported, jointly with the University of Alberta and the Provincial Mental Health Advisory Council, an ongoing study on "Prevalence of Psychiatric Illness in Edmontonians."

- Initiated a Mental Health Information System (MHIS) user group review of information requirements for redevelopment of the MHIS.
- Undertook a "Child Welfare Assessment Study" to assess children in care of the Child Welfare Branch in regard to psychological characteristics and emotional disturbance. The results will be used to assist in the planning of services to Child Welfare clients.
- Commenced preparations in January, 1984, to re-assume responsibility for the operation of the six Regional Mental Health Clinics and the three Extended Care Centres, starting April 1, 1984.

Statistics for mental health services (operated by the Department's six regions) are given in the table below.

MENTAL HEALTH SERVICES – STATISTICS FOR 1983-1984

Number of Cases Treated in Outpatient Centres in the Period April 1, 1983 to March 31, 1984 Summarized by Sex and Age on March 31, 1984

DIVISION SUPPORT BRANCH

The Division Support Branch provides assistance to the Deputy Minister and programs of the Division in the areas of research, planning, evaluation, policy analysis, and information systems development. Assistance is also provided in response to requests from local health authorities.

The branch further refined its structure in 1983-84 and now consists of the following sections.

Electronic Data Processing Development:

- provides consultation, coordination and specialized assistance in the development of electronic data processing systems for programs within the Division and for local health authorities.

Epidemiology (Non-Communicable Diseases):

- provides research and data analysis consultation to programs and local health authorities regarding the distribution and impact of non-communicable disease.

Long Term Care Planning:

- provides consultation for service planning related to persons requiring long term care. Community-based service delivery is emphasized through joint planning with other provincial government departments.

Planning and Evaluation:

- assists in the development, coordination, and operation of planning and evaluation systems within the Division as well as policy research and analysis.

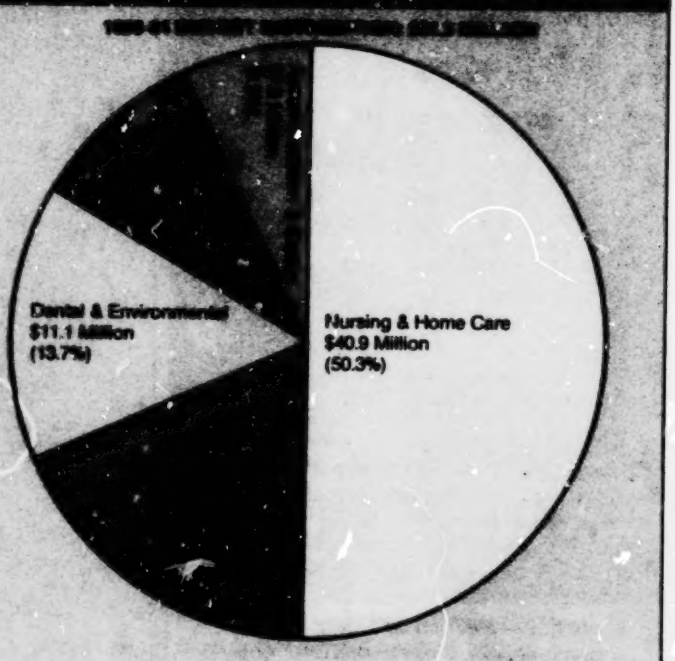
Drug Programs and Poison Control:

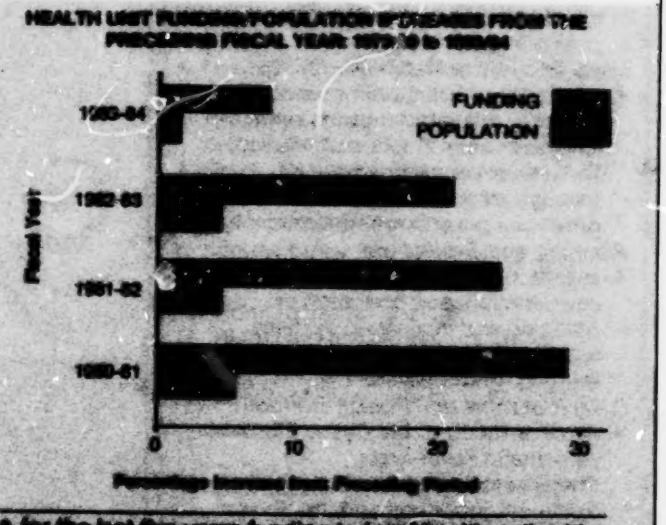
- administration of the Cystic Fibrosis, Rheumatic Fever and Phenylketonuria (P.K.U.) drug treatment programs and the Poison Control Program.

Highlights

- Developed a Single Entry Assessment/Placement Service Model for Alberta in conjunction with Hospitals and Medical Care, Alberta Housing, and the Alberta Housing Corporation.
- Developed a proposal for a Report on the Health Status of Albertans.
- Developed an options paper for the expansion of the Cystic Fibrosis Program.

1983/84 HEALTH UNIT FUNDING HIGHLIGHTS





- for the last five years funding to local health authorities has increased from $38.6 million in 1979-80 to $81.3 million in 1983-84, an increase of 110 per cent.

- Evaluated the Physicians Notice of Birth reporting procedure and form in conjunction with other program areas of the Division.
- Developed a paper, "Home Care vs. Institutionalization" for Priorities Committee of Cabinet.
- Reviewed and analyzed services to Southern Alberta local health authorities from the Provincial Laboratory.
- Represented the Department on an interdepartmental committee to respond to the Hyde Report
- Assisted in the Fifth Symposium on the Prevention of Handicapping Conditions of Prenatal and Perinatal Origin held in Calgary at University of Calgary School of Medicine.
- Planned for the expansion of the Coordinated Home Care Program scheduled for implementation in July, 1984.
- Assisted in implementing computerization of the Home Care Program with local health authorities and developed a Home Care Information System Grant Policy.
- Prepared an EDP plan for the Division and local health authorities.
- Participated in Federal/Provincial Community Health coordination activities including an accreditation working committee and the working committee on community health information.

FINANCE INFORMATION AND SUPPORT SERVICES

Finance, Information and Support Services (F.I.S.S.) provides monitoring, evaluating, coordinating and control services in the areas of finance, personnel and general office administration for the Health Services Division and its funded agencies. F.I.S.S. provides financial and support services to the 25 health units and 2 local boards of health. It is also responsible for the Accommodation/Capital programme.

VITAL STATISTICS

Vital Statistics administers the requirements of the Vital Statistics, Marriage, and Change of Name Acts. The objectives of the program are to: register all births, deaths, marriages and changes of names that occur in Alberta: provide confirmation of the occurrence of these events to those entitled; provide a data base to monitor the state of public health in Alberta; and, register and licence marriage commissioners, clergy

to perform marriages, district registrars, embalmers and apprentice embalmers.

Highlights

- The Vital Statistics Information Terminal System (VISITS) was fully operational by July 1983. Its implementation has improved turn-around time on data entered and certificates produced from three months and six weeks respectively to five working days.
- Event statistics for 1983 compared to 1982:

	1982	1983	(%+)
Births (total)	44,912	45,679	+1%
Births out of wedlock	7,661	7,489	-2%
Marriages	22,327	21,159	-7%
Deaths	14,176	12,790	-10%

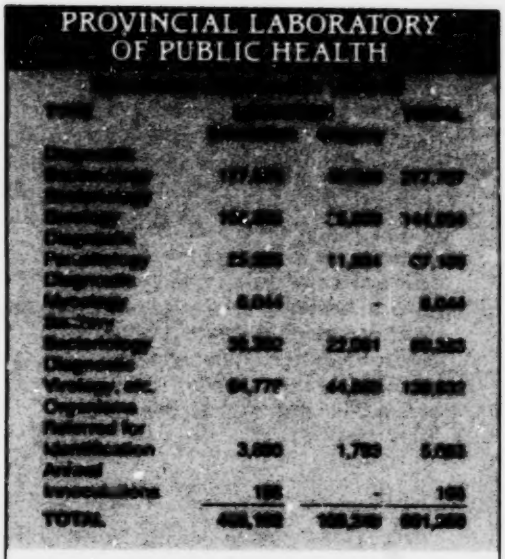
- Vital Statistics relocated its office to the Texaco Building at 10130 - 112 Street, Edmonton in February 1984. The new premises have main floor access to provide better service to the general public.
- Produced three publications to inform the general public how to access services provided by Vital Statistics.

PROVINCIAL LABORATORY OF PUBLIC HEALTH

The Provincial Laboratory of Public Health provides diagnostic and public health microbiology services, including bacteriology, virology, mycology and parasitology, to physicians, hospitals, and health authorities.

Highlights

- The mycology section of the Provincial Laboratory, Edmonton, was chosen by the Department of National Health and Welfare to be the National Reference Centre for Human Mycotic Disease. The Centre was established in April 1983, receives support from federal funds, and provides laboratory tests for diagnosis of fungal diseases in patients throughout Canada.
- Published and distributed a new edition of the "Guide to Services" booklet to all physicians in the Province. It describes the use of laboratory tests in the diagnosis of infectious diseases.



PROVINCIAL BOARD OF HEALTH

The Provincial Board of Health:

- makes rules and regulations under the Public Health Act and reviews them to ensure they are updated when required.
- monitors the application of the regulations.
- serves as an inter-departmental forum for the review of health-related issues.

The Provincial Board of Health and Environmental Health Services of this Division serve as a means of communication with, and support to, local health authorities in the performance of their responsibilities.

Highlights

- The Provincial Board of Health, in conjunction with the Department, made recommendations to government on the sour gas well blowout at Lodgepole and subsequently presented its submission at the Lodgepole Inquiry in Drayton Valley. It gave direction for and monitored follow-up activities.
- The Board heard 14 appeals of decisions rendered by local boards of health, and 12 requests for waivers of public health regulations.
- Approvals were issued for the establishment of new refuse disposal sites, cemeteries, semi-public swimming pools, and milk pasteurization by-laws.
- Regulations were drafted and legislated for Bulk Foods, thereby allowing for the sale of non-perishable foods in bulk form as

demanded by the general public and the food industry.

- The Institution regulations were amended to delete the need for tempering devices on water faucets in institutional premises. It was felt that supervisory staff are available to prevent accidents, due to high water temperatures, from occurring.
- Regulations in respect to environmental health underwent a general review in order to modify the demands being made of private citizens and to maintain the principles of public health. This regulation review will continue into the next fiscal year.

Social Services Division

Social Services Division (PROGRAM DEVELOPMENT)

After the reorganization and role clarification of 1982-83, the focus of Social Services Division efforts in 1983-84 was a major review of all social services programs to assess the degree to which they met government priorities and directions, and to propose modifications required to adjust programs to those directions. This review was know as 'reshaping.' A period of short-term and intensive review was followed by a commitment to ongoing program planning and adjustment of programs so that the programs designed for Service Delivery would represent the "best fit" between the needs of identified client groups and prevailing social, political and economic conditions. Following are some of the qualities by which program designs were judged to determine their conformity to newly identified goals. Programs were assessed to see that they were: economical and cost effective; incorporating flexible delivery; clear and simple, with minimal regulation; reflecting values of minimum intervention, prevention and early intervention; favouring the voluntary and community sector; respectful of constitutional and individual rights; and supportive of individual and family responsibility. The reshaping review resulted in significant program changes and the initiation of multi-year efforts which can be expected to have major impact on Alberta social services in the future. Following are some of the highlights of program reshaping activities.

Children's Services participated in a major review of both the program and delivery aspects of all child welfare services. The results of this review, in combination with the Cavanagh Board of Review report on the child welfare system, in October 1983, were used as the basis of a new Child Welfare Bill, tabled at the fall sitting of the Legislature. This Bill constituted a major new approach to child welfare services, in keeping with the principles enunciated above, and will set direction for child welfare services in years to come. At the same time, other aspects of service were rationalized, in anticipation of the transfer of the young offenders service to the Solicitor General on April 1, 1984, on implementation of the federal Young Offenders Act.

In **Income Security**, introduction of the Widows' Pension Program in July provided a new benefit to many needy Albertans, and also enabled the transfer of a specific segment of social allowance cases to a pension-type program. This was seen as part of an ongoing process to ensure that income benefit programs are designed so as to meet the particular needs of identified target groups, and that additional services (such as counselling or employment support) can be economically provided to those groups that can benefit from them the most. Social Allowance procedures were simplified in response to field requests. In addition, significant changes were made to eligibility rules and benefit levels, so that the program remained in tune with conditions created by the recession, such as increased unemployment, decreased housing costs, and altered community expectations.

The **Public Guardian** program underwent a major evaluation, focussing on its operation, mandate and legislative base, and implemented recommendations from the review. The program continued its emphasis on alternatives to public guardianship, and on local community involvement in guardianship cases, in keeping with the principles of the reshaping review.

Residential Services concentrated much of its effort on developing comprehensive descriptions and standards for the various residential programs under its jurisdiction, for use by regions in ensuring program integrity and a full continuum of services to their clients. Planning for the future of Baker Centre in Calgary and for the placement of former residents of Michener Centre were also important activities related to the need to reshape and rationalize traditional programs.

Family Relations completed evaluations of two programs (locate and the children of unmarried parents program) in order to determine effectiveness and make recommendations for change. A review of the family conciliation/court services program led to proposals to change the program (in cooperation with the Department of the Attorney General) to help reduce court costs and provide

services that were more supportive of family decision-making. Hosting of the western regional professional conference on family conciliation in February 1984 also focussed attention on a service with potential for encouraging the use of less intrusive measures in resolving family disputes.

Rehabilitation Services undertook a variety of initiatives to increase placement in employment of Department clients affected by the recession, such as the development of new assessment and referral processes, and participation in federal/provincial initiatives in job creation. This branch also devoted considerable planning effort around the redesign of income security programs to support incentives to employment. Policies and standards for various rehabilitation programs for the disabled were developed, for use by regions in ensuring a consistent quality of client service.

In January 1984, the major organizational shift which the Department experienced, resulted in a name change for the division (to Program Development Division), a clarification of mandate, and a new organizational alignment.

The Senior Citizens Bureau was transferred into the division from the Planning Secretariat, and the Day Care branch from Health Services. As a result of the work which had been done during 1983-84, the Family Relations branch was asked to assume responsibility for developing a departmental position on the problem of family violence. In addition, the concept of a new Family Support Services branch was developed to plan programs that would support family functioning, in keeping with the program reshaping directions and the principles and future directions of the Children's Services and Family Relations programs; plans were made for the programs that were formerly the responsibility of Family Relations to be incorporated into this branch. Finally, most program branches were grouped into two main "clusters," for purposes of planning and coordination of resources: the "Employment and Income Support Services" cluster included Rehabilitation Services, Day Care and Income Security; the "Family and Child Services" cluster included Family Support, Children's Services, Residential Programs and the Office for the Prevention of Family Violence. Plans were initiated for the creation of a "Special Needs Groups" cluster, with the existing Senior Citizens Bureau as the core, and anticipated additions of directorates for native citizens and handicapped citizens.

REHABILITATION SERVICES

Rehabilitation Services branch is responsible for the development, maintenance and promotion of programs which enhance the independence of disabled and disadvantaged Albertans. The branch also provides consultation and support to the following departmental programs which operate in the field of vocational rehabilitation:

Employment Opportunities Program; Employment Skills Program; Vocational Services Program; and Temporary Employment Programs.

During 1983-84, Rehabilitation Services undertook a variety of initiatives in the development of programs to enhance the independence of departmental clients and provide opportunities for work. These included:

- Developed, with Alberta Manpower, a process to assist Employment Opportunities Program to access jobs for clients created through the federal/provincial New Employment Expansion and Development Program (NEED) and the Priority Employment Program (PEP).
- Planned, with Alberta Manpower, new job creation initiatives for departmental clients.
- Developed, through the Vocational Rehabilitation of Disabled Persons Coordinating Committee, an interdepartmental approach to services for mentally handicapped adults. A manual detailing training programs for the mentally handicapped was produced and an evaluation was completed to determine placement outcomes for graduates from vocational training programs for the handicapped.
- Developed draft policies on developmental activity, social maintenance and sheltered employment.
- Liaised with delivery and the Canada Employment and Immigration Commission to improve understanding and cooperation in matters relating to income support.
- Determined administration costs for vocational agencies and negotiated rates for services with the Alberta Association of Rehabilitation Centres.

- Increased community liaison by the Employment Opportunities Program in the promotion of Alberta Manpower's job creation programs.
- Developed, with Social Services Delivery, a revised assessment and referral procedure to the Employment Opportunities Program to identify job ready clients for jobs.
- Completed program policy manuals.

Rehabilitation Services also consulted with Alberta Manpower on the potential transfer of the Employment Opportunities Program and the Employment Skills Program. The decision was made to retain the programs within the Department. As a result of this review, Rehabilitation Services continued a line authority for the delivery and operation of the two programs. Responsibility for the administration of Temporary Employment Programs within the Department was transferred to Personnel.

The **Employment Opportunities Program** provides assessment, counselling, employment preparation and placement services to assist departmental clients prepare for and secure employment. Services were provided to a monthly average of 5,015 persons receiving social allowance. A total of 14,176 people were assisted in 1983-84. Of these, 3,135 were placed into employment and 2,052 were placed into training. Of the employment placements, 1,091 clients were placed into employment created by the NEED program and 267 clients into employment created through PEP. Job clubs were also started in Edmonton to assist clients with self-placements.

The **Employment Skills Program** provides short-term work experience opportunities of up to six months in provincial government departments and agencies for social allowance recipients who are willing to work, but lack the necessary skills to get a job. The program is funded by Alberta Manpower and managed as a specialized program of the Employment Opportunities Program. During 1983-84, work experience was provided for 490 people.

The **Vocational Services Program** provides vocational preparation and training services for disabled adults. Services are delivered and managed by community-based non-profit organizations through funding provided by Social Services and Community Health. Trainees within the Vocational Services system are handicapped adults who require training and employment preparation that is not available within the established Manpower training system in the province. In 1983-84, 33 community agencies were funded for 2,402 training spaces. This program has been decentralized since 1981 and is under the direct authority of each Regional Director.

INCOME SECURITY PROGRAM

The Income Security Program branch promotes the well-being of the people of Alberta by ensuring that income security sub-programs are provided. These programs are evaluated and monitored to ensure they are meeting their objectives. Descriptions of these sub-programs follow:

Social Allowance

The Social Allowance Program provides financial help to people who do not have sufficient resources with which to meet basic needs for themselves and their family. Rehabilitation and employment services may also be provided to social allowance recipients. Benefits include food, shelter, fuel and utilities, and personal allowance. Unemployment recipients also receive monthly clothing and household allowances. Medical and other special benefits may be provided if needed.

Alberta Assured Income Plan (AAIP)

AAIP is a provincial supplement paid to persons receiving the federal Guaranteed Income Supplement to the Old Age Security pension. At March 31, 1984, the benefit level ranged from a minimum of $10.00 to a maximum of $95.00 per month. There were 80,797 recipients.

Assured Income for the Severely Handicapped (AISH)

The AISH program was established to enhance the living conditions of severely handicapped Albertans. The program provides an income approximately equal to that available to Alberta's senior citizens. The maximum benefit as of March 31, 1984 was $624 per month. Persons who cannot meet their basic needs from this amount may qualify to receive a supplement under the Social Allowance Program. Recipients living in nursing homes, auxiliary hospitals and other designated facilities receive a modified benefit which is equivalent to the amount of basic necessities as determined under

the Social Development Act, plus $52.00.

Day Care Subsidy

The Day Care Subsidy Program assists parents of low income families to pay for day care while they work, attend school, or have special needs. The amount of the benefit is based on net family income and family size. The maximum monthly subsidy benefit was $240.00 for full-time day care. Parents pay a minimum of $45 per month of the day care costs.

Widows' Pension

The Alberta Widows' Pension program commenced in May 1983 to assist widows and widowers with limited income; 55 and over but under 65, by providing financial and health care benefits similar to those received by Alberta senior citizens. The maximum benefit as of March 31, 1984, was $624 per month. The total number of persons receiving the Widows' Pension in March 1984 was 2,670.

SOCIAL ALLOWANCE CASELOAD BY REASON FOR ASSISTANCE

Reason for Assistance			% Change
Persons 60 years and older	3,460	3,439	-1.3
Person with Dependent Children	17,412	18,418	+5.8
Physical Illness or Disability	7,800	8,417	+7.9
Mental Illness or Disability	1,411	1,560	+10.6
Mental Retardation	283	284	+0.3
Employables	10,949	12,166	+11.1
Unsuited for Employment	824	777	-5.7
SUB TOTAL	42,179	45,079	+6.9
Guardian Social Allowance	1,069	1,313	+20.9
TOTAL	43,381	46,392	+7.2

ASSURED INCOME FOR THE SEVERELY HANDICAPPED CASELOAD

			% Change
AISH with Social Allowance Supplementation	1,609	1,709	+6.2
AISH with maximum benefits	7,117	8,118	+14.1
AISH with modified benefits	862	877	+1.7
TOTAL	9,488	10,704	+12.8

DAY CARE SUBSIDY MONTHLY AVERAGE CASELOAD

			% Change
Number of Participating Families	6,844	7,378	+7.8
Number of Children in Day Care Subsidy	8,564	9,477	+10.7

RESIDENTIAL SERVICES PROGRAM

The Residential Services Program was formed in 1982 by combining the residential support services from the Services for the Handicapped Branch with responsibility for hostels for single transient persons and the specialized adult services. Its goal was to ensure an appropriate and sufficient range of residential services to meet the needs of the people of Alberta, and to monitor and evaluate such services to ensure their quality and effectiveness.

In 1983-84 the first Residential Services Program Manual, incorporating program parameters and standards for residential services to disabled persons, was published and reviewed. Program parameters for existing services such as Single Men's Hostel, Adult Care Institutions and Behavioral Services were drafted. The Emergency Women's Shelters program was transferred from the Planning Secretariat in July, and a major program review was initiated. The Consolidation of standards for all residential services was initiated, and will continue through the 1984-85 year with input invited from a range of residential operators and interest groups.

Previous plans for restructuring the services of the Baker Centre in Calgary were reviewed and revised to increase the community involvement in services. A planning process was developed for Michener Centre to assist residents who wish to transfer to Community Services.

The Residential Services Program assisted in the development of a pilot service system in Northeastern Alberta for women who are victims of family violence, and initiated the development of several alternative programs to group homes for mentally handicapped adults.

FAMILY RELATIONS PROGRAM

In 1983-84, the Family Relations Program underwent further changes. In 1983 the program assumed responsibility for steering departmental activities relating to family violence. Major attention was focused on the issue of violence against women and addressed through participation on an interdepartmental committee and National Working Group on Wife Battering. As well, data collection began on services in Alberta, audio-visual materials were reviewed and the program began to establish an Alberta

clearinghouse of information on violence against women, children and the elderly in the context of the family.

In 1984, work commenced on the potential integration of Family Relations into a new Family Support Services branch with an expanded range of programs.

Development also began on a more formalized focus for coordinating family violence initiatives within Social Services and Community Health over the next three to five years. Major emphasis of family relations continued to be on the mediation/conciliation and counselling functions.

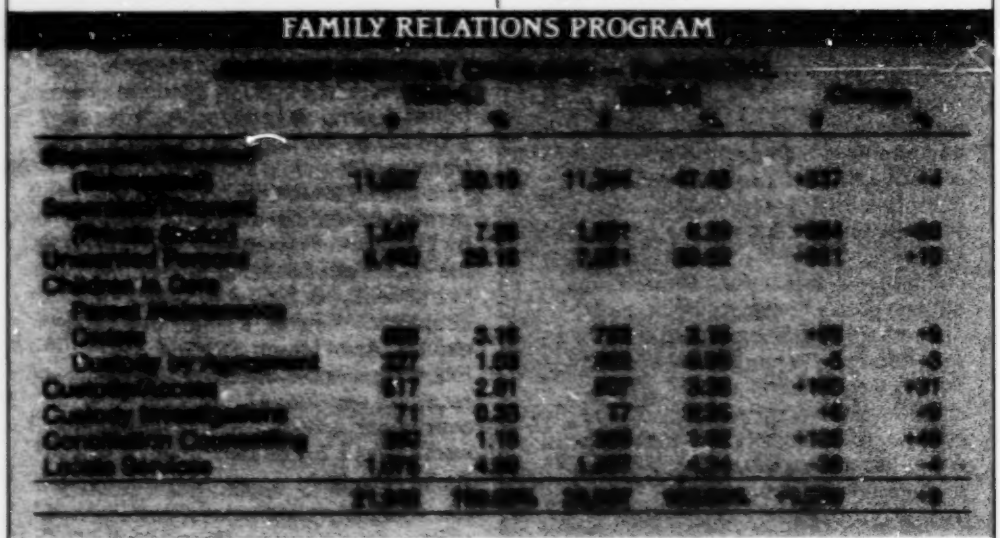
Trends in revenue and caseloads established in 1982-83 continued in 1983-84. Total revenue in the Separated/Divorced area rose 18 per cent, with an increase of 10 per cent paid to the General Revenue fund and an increase of 20 per cent in maintenance paid directly to wives receiving social allowance. However, the corresponding caseload rose only four per cent. Services provided to Separated/Divorced persons in the Private Sector rose 23 per cent. The Unmarried Persons caseload rose 15 per cent over 1982-83 and revenue increased seven per cent. Funds disbursed to Unmarried Persons not in receipt of assistance increased 14 per cent. Funds disbursed to the provincial Treasurer for those unmarried persons receiving social allowance dropped one per cent.

Caseloads, including Parents' Maintenance Orders increased by nine per cent, and Custody Agreements decreased three per cent. Revenue in this area increased by six per cent. Major growth continued in the Custody Access caseloads. This area showed a 65 per cent increase in 1982-83, and a further 31 per cent increase in 1983-84. Conciliation counselling caseloads showed an increase of 46 per cent in 1982-83, with a further increase of 49 per cent in 1983-84. Custody Investigations showed a 57 per cent increase in 1981-82 but showed only a further nine per cent increase in 1983-84. The use of Locate Services was down four per cent.

Highlights

- Prepared and distributed monthly statistical analysis reports to the regions.
- Instituted monitoring visits to district/regional offices. Findings and recommendations were shared with the regions.
- Commenced major project in the area of family violence (wife battering, child abuse and abuse of the elderly).
- Commenced negotiations with the Attorney General's Department to establish pilot projects in the Maintenance Enforcement and Mediation - Court Services programs.
- Evaluated Locate Services and Children of Unmarried Parents Program to determine effectiveness and recommendations for change.
- Hosted Western Regional Conciliation Conference.

FAMILY RELATIONS PROGRAM



FAMILY RELATIONS PROGRAM – PROVINCIAL STATISTICS SUMMARY

Separated/Divorced Persons (Subrogated)	(A & B)			
Unmarried Parents	(C)			
Children in Care				
Parents Maintenance Orders	(E)			
Custody by Agreement	(F)			
TOTAL				

Paid into General Revenue of the Province	(A,D,E,F)	2,000,000	2,218,296	197,433
Separated/Divorced	(A)	1,148,114	1,331,859	183,745
CUP (Children of Unmarried Parents)	(D)	538,725	535,779	(3,346)
PMO & CBA	(E,F)	313,604	330,638	17,034
Paid directly to wives on SALL and SALL reduced accordingly	(B)	3,441,840	4,081,410	639,570
Collections on behalf of unwed mothers and children not in receipt of SALL	(C,D)	969,999	849,853	79,884

LEGEND: A - Cash receipts, orders, agreements, etc.
B - Maintenance received by SALL recipient, deducted from SALL
C - Orders and agreements, children of unmarried parents
D - Maintenance, Children of Unmarried parents refunded to General Revenue.
E - Parents Maintenance Orders (Parents of Temporary Wards)
F - Custody by Agreement (Agreements with maintenance provisions)

CHILDREN'S SERVICES PROGRAM

The Children's Services Program is responsible for the development, monitoring, and evaluation of programs for the protection, care, and social development of children. On March 31, 1984, a total of 16,332 children were receiving services through various child welfare programs. Of this total 11,452 children were living in non-residential placements, such as with their own parents or relatives, or independently. The remaining 4,880 were in the physical care of the Director of Child Welfare, residing in placements such as foster homes, group homes, or institutions. These figures represent roughly a 12 per cent decrease in month-end caseload figures from March 31, 1983. It is estimated that approximately 36,000 children received services during the entire fiscal year, through one or more of the following programs:

Family Support.

In home services are provided to avoid or alleviate conditions which could otherwise result in removing the child from his/her home. As of March 31, 1984 this program was providing support to approximately 5,500 children and their families.

Supervision, Temporary Wardship, and Permanent Wardship Orders.

A supervision order is provided by the court to provide for the Director's supervision of a child in the child's own home. A temporary wardship order is provided by the court to provide for the transfer of the child's custody to the Director for a temporary period. A permanent wardship order is provided by the court to provide for the transfer of the child's guardianship to the Director permanently, or until the child is adopted or the child's status otherwise expires. As of March 31, 1984, the following number of children were receiving services: 471 through supervision orders, 2,675 as temporary wards, and 2,294 as permanent wards.

Young Offenders.

This program provides services ranging from at home counselling (probation) to residential placement including compulsory (secure treatment)

care. As of March 31, 1984, 423 youths were in the care of the Director of Child Welfare as temporary wards committed by the courts through the Juvenile Delinquents Act. Child Welfare's responsibility for providing services to newly-charged young offenders ended on March 31, 1984. The Department of Solicitor General assumed the responsibility for the new Young Offenders Act effective April 1, 1984.

Foster Care.

Foster Care provides children who require care outside of their own homes with a small group, family-based alternative capable of providing healthy parenting while supporting the child's growth and development. Approximately 3,400 children were residing in foster homes on March 31, 1984

Child Protection.

This program provides professional casework services to investigate all allegations of children in need of protection, which includes children allegedly neglected or abused, and to provide any support/intervention required by families or children. Approximately 15,000 children in need of protection were reported to the Department in 1983-84.

Community Resources.

Community based intervention services are provided to children and their families when a child or family is considered "at risk." Most services provided involve homemakers, recreation programs, community resource workers, restitution programs for young offenders and probation services. About 1,500 children and families received services in 1983-84.

Custody by Agreement.

This program allows parents to temporarily give up custody but not guardianship of their child to the Director of Child Welfare for a specific time period. There were 301 children receiving services through this program on March 31, 1984.

Handicapped Children's Services.

This program assists parents with costs incurred by a child's handicap. The number of children who were receiving Handicapped Children's Services services on March 31, 1984 was 3,070 (this included a number of children whose agreements had not been finalized as of this date. These children are included in the Status Yet To Be Established category in the table below.)

Residential Resources.

Residential programs, designed to provide treatment, are provided to children in care of the Director. These include group homes and institutions. On March 31, 1984, 1,359 Wards of the Director were residing in residential facilities.

NUMBER OF CHILDREN RECEIVING SERVICES BY PRIMARY STATUS MARCH 31, 1983 AND MARCH 31, 1984

Pr Action	885	911	+2.9%
Permanent Ward - Vest to Adopt	690	417	-39.6%
Permanent Ward	1,959	1,877	-4.2%
Custody by Agreement	362	301	-16.9%
Handicapped Children's Services	2,972	2,814	-5.3%
Temporary Ward - Juvenile Delinquents Act	425	423	-0.5%
Status Yet to be Established*	836	693	-17.0%
Temporary Ward Child Welfare Act	3,159	2,675	-15.3%
Apprehension	394	291	-26.3%
Supervision	528	471	-10.8%
Family Support	6,394	5,449	-13.8%
TOTAL	18,697	16,332	-11.8%

* Includes H.C.S. agreements, Permanent Wardship orders, and Apprehensions in progress

NUMBER OF CHILDREN RECEIVING SERVICES BY PLACEMENT TYPE MARCH 31, 1983 AND MARCH 31, 1984

PLACEMENT TYPE	MARCH 31, 1983	MARCH 31, 1984	%
Parent's Care	10,195	9,131	-10.1%
Relative's Care	1,721	1,469	-14.5%
Commercial Boarding Home	83	65	-21.7%
Independent Living	124	109	-12.1%
Auxiliary Care Facilities	224	182	-22.5%
Jail	11	10	-9.1%
Hospital	102	69	-32.4%
Adoptive Home	650	317	-51.9%
TOTAL NOT IN RESIDENCE	13,859	11,482	-12.3%
Foster Home	3,843	3,414	-11.2%
Contract Group Home*	385	402	+4.4%
Government Group Home*	202	191	-5.5%
Residential Resource*	459	437	-4.8%
Community Care	166	170	+2.5%
Detention	45	35	-22.2%
A.W.O.L. from Home	149	128	-14.9%
Other Non-Home	191	167	-12.6%
TOTAL IN RESIDENCE	5,087	4,850	-4.7%

* Total includes children placed in Contract Group Homes, Government Group Homes, and Residential Resources

Permanent Wardship/Surrenders

This program enables parents who are incapable or who have no desire to provide guardianship to their child to voluntarily relinquish guardianship to the Director. Approximately 450 surrenders were approved in 1983-84. All children who are surrendered become permanent wards and are eligible for adoption.

Ward Adoptions.

Ward Adoptions transfers guardianship of permanent wards to adoptive parents and provides services to adoptees, birth parents, and adoptive parents. Approximately 750 permanent wards were adopted and 850 adoptive parent applications were approved.

Non Ward Adoptions.

This program assists persons who wish to establish guardianship with a specific child, residing with them, or known to them (e.g. step-parent/step-child). There were approximately 900 non ward adoptions in 1983-84.

Highlights

- Participated in the planning and development of Bill 105 and Bill 35, drafts of the revised Child Welfare Act.
- Participated in the planning and implementation of the new federal and provincial Young Offenders Acts.

OFFICE OF THE PUBLIC GUARDIAN

The Office of the Public Guardian develops and promotes guardianship programs for adults who are unable to care for themselves, make reasonable decisions on their own behalf, and are in need of a guardian. Guardians, public or private, act as substitute decision-makers for dependent adults in accordance with the Dependent Adults Act.

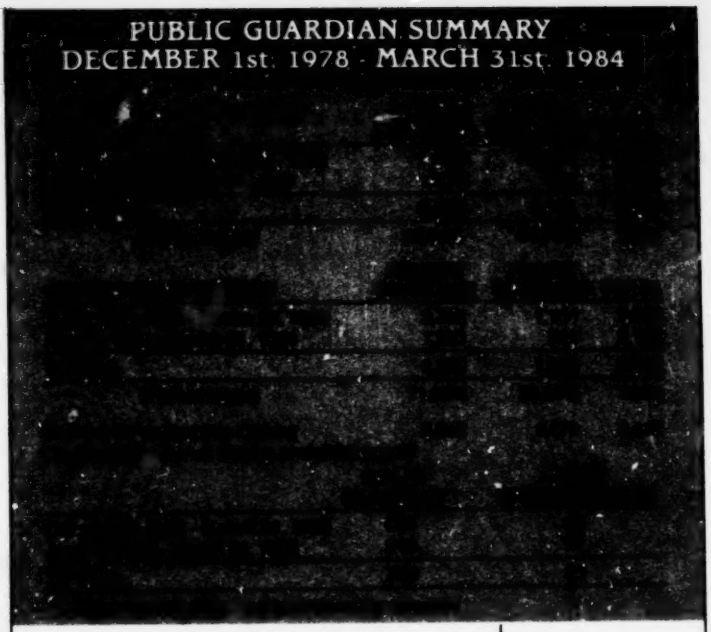
A total of 2,184 guardianship applications were commenced and 2,125 orders were received. A total of 1,533 private guardians were appointed and the Public Guardian was appointed for 592 dependent adults in cases where a willing, able and suitable private individual could not be found. Only 62 orders involved plenary (full) guardianship and 2,063 involved partial guardianship. A further 246 referrals were examined and closed when a need for guardianship could not be established. Specific abuse concerns prompted 21 additional investigations. There are 822 persons in the referral phase.

Guardianship reviews are completed at least every three years in order to examine what decisions the guardian has made on behalf of the dependent adult and to determine the continuing need for guardianship. A total of 516 orders were reviewed in 1983-84 and discharges were granted in 20 cases. Partial guardianship was ordered in all but 27 cases.

As of March 31, 1984, there were 5,112 guardianship orders in the province; 3,642 dependent adults had private guardians and the Public Guardian was responsible for 1,470 dependent adults.

Highlights

- The number of dependent adults increased by more than 55 per cent; and at the same time, staff was trimmed by 11 people. However, the workload did not increase since a concerted effort to encourage the involvement of the community, and particularly private guardians, in guardianship programs was made.
- The Community Liaison Committee was established under ministerial order to assist in the planning, coordination and evaluation of community support and educational programs. This year, 13 agencies were involved in the program.
- Private sector applications accounted for more than 70 per cent of the applications put before the Courts. In 1981-82, the Office of the Public Guardian initiated over 75 per cent of all such applications. A backlog, at that time, of nearly 6,000 applications has been reduced to less than 825 on March 31, 1984.
- An evaluation of the Office of the Public Guardian was completed in 1983. The basic purpose of the study was to review the current activities of the branch and its programs in terms of legislative mandate.
- Internal activities included acquisition of a new information processing system, completion of a policy manual and the commencement of file audits in all regional offices.



Associate Deputy Minister
Service Delivery

Associate Deputy Minister Service Delivery.

The Office of the Associate Deputy Minister was reorganized during 1983-84 period as part of the senior management reorganization to reflect the completion of the establishment of the Regional Plan. The mandate of the Office of the Associate Deputy Minister is to direct the efficient and effective delivery of designated departmental services, and to ensure their coordination. The broad responsibilities of this structure are:

- to act as spokesman for the Regions in all divisional management forums;
- to ensure an inter-regional perspective and presence in divisional planning, budgeting and program development;
- to determine the effectiveness and efficiency of organizational units involved in delivery of service;
- to manage the direct program delivery of Widows' Pension Program;
- to conduct special Service Delivery projects including implementation planning, in consultation with the six Regions;
- to represent the viewpoint of the Department to outside interest groups and organizations.

Highlights

The following highlights were achieved during the implementation of the Regional Plan, re-organization and implementation of program changes:

- Completed the decentralization of Operations Support responsibilities and authorities to the six regions.
- Decentralized budgetary control on expenditures in child welfare.
- Designed and implemented Child Welfare Program and Delivery Review; and participated in the planning and drafting of the Child Welfare Act.
- Designed and managed the Child Welfare Information Systems Review to improve the child welfare information base for planning, program and policy development and delivery.
- Negotiated and designed the implementation for the transfer of the Young Offenders Program to the Solicitor General.
- Transferred the reporting relationship of Planning Secretariat and Operations Support to Deputy Minister, Social Services; and Management Audit to Planning Secretariat.
- Improved delivery of Income Security and Child Welfare services.

Highlights from the regional offices follow:

NORTHWEST REGION

- Service Agreement between Social Services and Mental Health Services was drawn up. The agreement reflects continued cooperation between the services and a continued commitment to clients.
- Developed and implemented Child Welfare Case Management policies and procedures to ensure higher quality services and more efficient utilization of resources. The Child Welfare case plan was developed to ensure the use of an integrated approach to services for children.
- Implemented monitoring and forecasting procedures to increase management accountability and more efficient management of problem and manpower budgets.
- Reviewed and redeployed positions across the region to more equitably meet the needs of our clients and community agencies.
- Developed regional program committees consisting of front line staff to provide input to regional management in the administration and delivery of programs.
- Initiated regular meetings between regional management and community groups to promote increased understanding, cooperation and liaison with groups and service agencies. These groups include Family and Community Support Services, foster parents associations and rehabilitation agencies.
- Worked with the Lesser Slave Lake Indian Regional Council in preparing Regional Council to assume responsibilities for Child Welfare Services on the reserves. The Region is assisting in the training and development of staff to prepare the Regional Council for these responsibilities.

- Developed a regional policy statement to emphasize the importance of strengthening preventive services in each worksite. The worksites will incorporate this philosophy into all possible service delivery methods.
- The Mental Health community clinic system received accreditation for the maximum period of two years.

NORTHEAST REGION

- Expanded the Geriatric Program to the community of Bonnyville.
- Established an AISH Consultation Committee to provide a multi-disciplinary approach in determining client eligibility.
- Established regional meetings to promote greater understanding among groups and individuals involved in assisting clients.
- Established a Child Welfare Consultation Unit consisting of Foster Parent Training Coordinator, Child Welfare Psychologists, Child Welfare Residential Resources Coordinator, and the Child Welfare Program Consultant.
- Instituted a standardized system for Child Welfare files to allow easier access to information and transfer throughout the Northeast and Calgary Regions.
- Established quarterly meetings of Regional Foster Parent Association Presidents and District Office Liaison Foster Care Workers.
- Regular meetings were held with executive directors of private rehabilitation agencies and with day care and family day home operators.
- Family Day Home Agencies increased service by 137 per cent (monthly enrollment up from 111 to 264, Total - 2,156 Children) and Day Care increased services by 35 per cent (337 to 447 by monthly enrollment - Total - 4,348 children.)
- A Regional Newsletter was established for the Day Care Program and distributed to Day Care facilities, Family Day Home Agencies, and District Offices.
- The Rural Family Violence Program was established in Northeast as a provincial pilot project, offering a broad range of services in a cost effective manner.
- Athabasca District Office and Consultation Unit, Grand Centre Sub Office, and Saddle Lake Group Home were opened 1983-84. Fort McMurray District Office established a Rehabilitation Unit to coordinate their approach to the handicapped.
- Vegreville District Office developed a booklet titled "Child Protection Services - A Guide for Professionals."

EDMONTON REGION

- Leduc District Office and Grande Cache District Office were opened to deliver departmental programs.
- Resources for the Dependent Handicapped opened a Vocational Training Centre and two group homes.
- Strathcona Shelter Society went into operation to serve battered women and families of Strathcona County.
- Major renovations were carried out at Edmonton Juvenile Detention/Receiving Centre and the Region assumed responsibility for Westfield and Youth Development Centre.
- Completed planning for a specialized treatment unit at Westfield.
- Established the Hinton and continued the Edmonton Receiving Family Support Program for Child Welfare clients to reduce the need for foster homes and institutional care.
- Introduced "Sunday's Child" in the Edmonton Journal for foster home placements for children in care.
- Developed community information and referral resources through Community Relations.
- Established coordination of services with Mental Health, i.e. the Yellowhead Sexual Assault Program in Hinton.
- Integrated Community Behavior Services receiving centre Outreach Team (Handicapped Children's Services and Child Welfare).
- Integrated mentally handicapped clients (AISH) into Approved Home Program.
- Completed planning for the transfer of Youth Development Centre staff from the Juvenile Delinquents Act unit at Westmount, and a component of Detention to the Solicitor General's Department.

CENTRAL REGION

- Carried out evaluations of community programs and residences for the handicapped to ensure the delivery of quality services.
- Designed a new application and proposal format for day care centres.
- Conducted a survey of income policy interpretations in each district office and clarified policies where necessary to ensure equitable treatment of clients in the Region.
- Piloted a child welfare case monitoring system in the south area of the Region.
- Strengthened the working relationship between Social Services and Mental Health Services through joint child welfare case conferencing and orientation of staff in both services.
- Officially opened the Youngstown Home facility. The new building doubles the capacity of the institution for homeless, chronically unemployed men.
- The regional task force on alternative service delivery completed a conceptual model of a future regional system of delivering services. The project involved meeting with departmental staff, outside agencies and clients.
- Broadened participation at child welfare case conferences to include natural parents, foster parents and the child.
- Assisted in the establishment of a child abuse protocol that involved the Department and Red Deer Regional Hospital.

CALGARY REGION

- Reorganized various office units to improve client services. The Day Care Consultants and Licensing Officers were consolidated into one unit to provide better assistance to day care operators with few staff. The A.I.S.H. unit was consolidated into one office and Foster Care joined Residential Resources.
- Introduced Permanency Planning procedures for children in care and commenced training for all child welfare staff.
- Increased the degree of financial support being provided to Family Support Programs. A decrease in the number of children taken into care (approximately 700 less than in 1982-83) has been noted.
- Practice Standards for Family Services were developed and approved for use in the Region to ensure a consistent framework for the delivery of services to children and families.
- Funds for child sexual abuse treatment were awarded on an annual contract basis to Anderson & Mayes Counselling Associates ($140,000), Alberta Psychological Resources ($50,000) and the Alberta Children's Hospital Child Abuse Program ($50,000).
- Developed a regional audit team to review and monitor quality of services and documentation in Income Security and Child Welfare programs.
- The Baker Centre Redevelopment RFD was approved and the $20,610,000 capital construction project of 84 on-site spaces and 70 community group home spaces is underway.

SOUTH REGION

- Developed a Child Welfare Permanency Planning Package to guide workers through intake, investigation, diagnosis, case-planning and evaluation.
- Planned for Residential Services to improve the Region's capability for handling the residential needs of young people.
- Ratified an agreement with the Mental Health Program to provide services for clients in the South Region.
- Recognized efforts of volunteers through a program of presenting "Certificates of Appreciation" to volunteers who provide exemplary service to the community.

DAY CARE PROGRAM - MONTHLY AVERAGE LICENSED SPACES BY REGION

REGION	DAY CARE CENTRES	FAMILY DAY HOMES
Northwest	[illegible]	8
Northeast	441	16
Edmonton	7,869	87
Central	1,310	39
Calgary	9,970	121
South	1,504	34
TOTAL	22,747	305

SOCIAL ALLOWANCE AVERAGE NUMBER OF CASES PER MONTH BY REASON FOR ASSISTANCE FOR EACH REGION

REASON FOR ASSISTANCE	NORTHWEST	NORTHEAST	EDMONTON	CENTRAL	CALGARY	SOUTH	PROVINCIAL TOTAL
Age 60+	266	190	1,275	327	1,181	227	3,436
Person with Dependent Children	1,375	944	7,446	1,927	5,357	1,369	18,418
Physical Illness or Disability	722	529	3,424	944	2,305	492	8,416
Mental Illness or Disability	83	28	774	124	478	93	1,580
Mental Retardation	22	24	99	55	66	28	294
Employables	1,158	943	4,788	1,408	3,274	615	12,186
Unsuited for Employment	95	80	270	101	184	48	778
TOTAL CASELOAD	3,723	2,738	18,065	4,886	12,815	2,872	45,079

MONTHLY AVERAGE ASSURED INCOME FOR THE SEVERELY HANDICAPPED CASELOAD 1983-1984

	NORTHWEST	NORTHEAST	EDMONTON	CENTRAL	CALGARY	SOUTH	PROVINCIAL TOTAL
AISH with maximum benefits	683	499	2,900	949	1,920	1,068	8,118
AISH with modified benefits	35	40	295	48	206	50	677
AISH with Social Allowance Supplementation	116	88	776	123	485	121	1,709
TOTAL CASELOAD	834	1,628	3,974	1,119	2,312	1,239	10,504

AVERAGE MONTHLY CASELOAD FOR THE DAY CARE SUBSIDY PROGRAM BY REGION

	NORTHWEST	NORTHEAST	CENTRAL	EDMONTON	CALGARY	SOUTH	PROVINCIAL TOTAL
Number of Participating Families	210	196	515	2,731	2,843	583	7,078
Number of Children Enrolled in Day Care Subsidy	254	230	617	3,222	3,423	731	8,477

FAMILY RELATIONS PROGRAM

AVERAGE MONTHLY RECEIPTS BY REGION (1983-1984)

	NORTHWEST	NORTHEAST	EDMONTON	CENTRAL	CALGARY	SOUTH
Seperated/Divorced						
- To General Revenue	6,498	2,341	54,039	14,382	21,631	12,093
- Deducted from SALL	16,948	15,789	137,901	44,453	94,840	30,412
Unmarried Persons	6,388	4,650	39,151	10,366	25,017	7,353
Children in Care	439	824	8,824	2,148	13,225	789
TOTAL AVERAGE	30,153	23,604	239,915	71,349	154,713	50,647

AVERAGE MONTHLY CASELOAD BY REGION (1983-1984)

Seperated/Divorced						
- Subrogated	621	352	2,787	1,303	5,248	1,040
- Private Sector	160	31	1,275	15	262	215
Unmarried Persons	703	513	2,625	798	2,189	506
Children in Care	46	45	212	93	531	49
Custody/Access	12	-	416	12	306	59
Custody Investigations	.3	-	22	.8	52	1.4
Conciliation Counselling	16	-	340	7	22	-
TOTAL AVERAGE	1,559	941	7,677	2,229	8,610	1,870

PLANNING SECRETARIAT

The Planning Secretariat serves as a support group to the Minister, senior management, program divisions and regions by coordinating Department planning, policy analysis, research, evaluation and information collection and dissemination activities. Its main units are Strategic Planning and Policy Development, Planning Support Services (includes Research Support, Information Services, Library, and Evaluation), Legislative Planning, and the Senior Citizens Bureau. The Senior Citizens Bureau was transferred to the Social Services (Program Development) Division in January 1984.

Highlights

- Coordinated the development of the Departmental Strategic Plan for the 1980's.
- Assisted in the development of the new Child Welfare Act (Bill 105): conducted hearings in six regions with departmental staff; completed review and analysis of over 150 public briefs and over 50 written submissions on Bill 105; prepared research studies on various aspects of the Child Welfare system, such as the areas of adoption, foster care and others; and assisted in the development of the departmental response to the Cavanagh report.
- Developed reports for the Ethical Issues Steering Committee and Legal Liability Review Committee.
- Coordinated an Interdepartmental response to the Klufas Reports on Services to Disabled Persons.
- Chaired an interdepartmental working group on the review of the Handicapped Children's Services program.
- Studied the utilization of volunteers in Alberta and managed a study on an inter-provincial comparison of the use of volunteers.
- Produced an assessment of the impact of Social Allowance Policy Changes: April to December 1983.
- Developed a discussion paper on financial assistance programs and produced a discussion paper on evaluation policies on behalf of an Interdivisional Working Group.
- Completed a project on the revision of all legislation relating to Public Health.
- Developed the Marriage Amendment Act, Regulations for a revised AADL/EHB Program, and Alcoholism and Drug Abuse Amendment Act.
- Published information resource inventories and reports including two Alberta Social Resources Inventory directories for Edmonton and South Regions.

Senior Citizens Bureau

The Senior Citizens Bureau gathers and provides information on services, benefits, resource materials and data related to aging and the elderly. It also provides temporary education and special project grants, furnishes staff services for the Provincial Senior Citizens Advisory Council, and encourages cooperation among government departments on matters affecting the elderly -- assisting in the planning and coordination of programs.

In the calendar year 1983, the Bureau handled approximately 21,000 information requests. This represented an increase in requests of over 300 per cent from 1982, and probably resulted from the inclusion of a notice about the information booklet in material mailed to senior citizens by Alberta Blue Cross.

Highlights

- The Bureau published the booklet "Programs for Seniors", six issues of the newsletter "Fact Sheet", and the 1983 report of the Provincial Senior Citizens Advisory Council. It also produced a third issue of the kit "Understanding and Working with Older People", a kit on "Guidelines for Senior Citizens Centres", and the "Proceedings of the 1982 Alberta Symposium on Aging". In addition, a column was written for 10 issues of the Alberta Council on Aging News and two major background papers on the elderly were prepared to assist in planning and coordinating programs.
- A four-week bursary program for health care workers in the field of gerontology was initiated and developed by the Bureau and 19 education grants were provided to individuals to participate in this program. In addition to the annual operating grant to the Alberta Council on Aging, the Bureau provided funds for nine workshops and 13 special projects.
- The Bureau staff also participated in the Second Canadian Conference on Aging, worked with the Interdepartmental Subcommittee on Long Term Care, attended two meetings convened by the Health Facilities Resource Directorate of Health and Welfare Canada, and

served as a resource to the Nursing Home Liaison Committee. Regular bi-monthly meetings of the Interdepartmental Coordinating Committee on Senior Citizens were convened for information exchange. Twelve departments are represented on this committee.

CHILD WELFARE BRANCH

The Child Welfare Act of Alberta requires the Director of Child Welfare to investigate all reports of children whose safety and well-being is not assured. The Act further requires the Director to provide services and, where necessary, assume responsibility for the physical care of children. During the reporting period, the Child Welfare/Children's Services Programs provided services to more than 18,000 children.

Child Welfare programs are delivered in the six regions through the district offices. While some programs such as adoptions are delivered by specialized units, child care workers deliver a number of child welfare programs and other departmental services through the district offices.

Responsibility for negotiating agreements for the provision of community services to assist children and their families, responsibility for negotiating contracts/grants to provide residential treatment services for children under the care of the Director of Child Welfare, and specialization in the recruitment, training and support of foster parents are carried out by regional staff.

The efforts of caseworkers are assisted by community agencies which support the Department objective in protecting and assisting children and families.

Child Protection

The Director of Child Welfare is required, under part 2 of the Child Welfare Act, to investigate all complaints of child neglect or abuse and to provide support services to children and their families. Child Protection strives to maintain children with their families, but provides for the removal of children if the circumstances are judged to place the children at risk. While the primary focus of the program is protection of the child, the child's family may also receive services from the program.

Descriptions and reports of child welfare/childrens services programs can be found in the Social Services Division section on page 23.

INSTITUTIONAL RESOURCES

The Institutional Resources branch implemented the transfer of responsibility for the Edmonton Youth Development Centre, Westfield, Michener Centre, and Baker Centre to the Edmonton, Central and Calgary Regions respectively on February 27, 1984.

The responsibility for Claresholm Care Centre, Rosehaven and Raymond Home was transferred to the division of Mental Health on April 1, 1984, at which point the branch dissolved and all staff were re-deployed within the Department.

MANAGEMENT AUDIT BRANCH

The branch audits the management processes, financial reports and controls, and programs of the Department to ensure the resources are used properly. The Department is audited over a three-year cycle. During the past year the branch has focused on system audits. An example of a system audit being undertaken is the audit of all Social Allowance programs which comprises about 50 per cent of the Department's budget. There were 14 audits completed during the year.

OPERATIONS SUPPORT BRANCH

The Operations Support Branch established in July 1982, ensures the availability and management of the department's financial, human and physical resources and support services in keeping with departmental objectives. It is headed by an Assistant Deputy Minister and brings together Financial, Personnel, Administrative, Information Systems, Public Communications and Legal Services.

Personnel Services was transferred to the direct supervision of the Deputy Minister of Social Services in January 1984.

The branch, during 1983-84, standardized and further automated the regional budgeting process; initiated activities to establish standards for the allocation and utilization of human resources throughout the Department; coordinated additional downsizing through the abolishment of 162 and redeployment of 54 permanent positions for the 1984-85 fiscal year; completed the regionalization of Personnel and Financial Services; through Public Communications initiated the monthly publication of an employee newspaper "The News", and established ownership for each of the Department's information systems and sponsorship for those under development.

Financial Services

Financial Services is responsible for budget coordination and submission, expenditure control, payment of accounts for Headquarters, provision of financial support services, financial reporting systems, compliance review and managing the collection of department revenues.

Financial Services is continuing its major effort in completion of the transfer of financial activities to regions through establishment of Regional Accounting Officers. Working closely with Treasury to assure all financial accountability and control mechanisms are firmly in place, it is expected that Financial Services will have placed Accounting Officers in the regions by mid-1985.

In addition, the computer application for on-line data entry for Income Security Programs, known as Remote Data Entry (RDE), has been almost totally implemented. Approximately 95 per cent of the District Office locations are now "on-line"; RDE project is scheduled for completion by May of 1984.

Departmental expenditures increased by $72 million to over $1 billion in 1983-84. This was due primarily to an increase in the number of recipients of social allowance benefits and income support, rehabilitative and special health services, and day care. Departmental revenue increased by $10.3 million to $428.2 million or 40% of expenditures.

Financial statements for the 1983-84 fiscal year follow on page 36.

Administrative Services

Administrative Services reorganized in 1983-84 to reflect the revised post-decentralization role and to identify its responsibilities: Accommodations, Purchasing, Records, Word Processing and Office Services (Parking Administration, Vehicle Leasing, Insurance Administration, Mail Management and RITE Administration).

Accommodation projects completed included: new district offices in Athabasca, Peace River, Rocky Mountain House and Crowsnost Pass; Youngstown Home; and the Youth Development Centre in Strathmore. Several major and minor renovation projects were also undertaken including: Alberta Place, Calgary; Nordic Court, Grande Prairie; Westfield, Edmonton; Edmonton Receiving and Detention Centre; Michener Centre, Red Deer; and reallocation of Headquarters space in Edmonton.

A new computerized Client Index was impiemented for the Income Security Program and planning commenced for the decentralization of Income Security files. Revised departmental policies were published for Parking Administration, Fixed Asset and Forms Acquisition and Control. The Telecommunications Cost Reduction Program, sponsored by APWSS, commenced implementation. Word Processing in Headquarters continued to expand.

Personnel Services

Employee Relations

The Employee Relations section handled 129 disciplinary actions and 120 grievances, of which 31 were carried over from 1982-83, four from 1981-82 and one from 1980-81. This represented a decrease of 15 per cent in disciplinary actions and a decrease of 74 per cent in grievances. By the end of the fiscal year, 78 grievances were settled with 27 carried over to 1984-85.

This year the departmental Long Term Disability Unit was granted approval for funds from Treasury in order to facilitate the rehab-placement and the rehab-training of Long Term Disability recipients.

Over the course of the year the number of claims have increased on a continual basis. An increase was observed in degenerative disc and stress-related claims during this period.

BUDGET ESTIMATES, SPECIAL WARRANTS AND EXPENDITURES CLASSIFIED BY VOTE ($000)

	1983/84 BUDGET ESTIMATES	1983/84 SPECIAL WARRANTS	EXPENDITURES FOR THE YEARS ENDING MARCH 31 1984 (a)	1983 (b)
VOTE 1 - DEPARTMENTAL SUPPORT SERVICES (no Sub-Program breakdown)				
Minister's Office	357	-	294	390
Appeal & Advisory Secretariat	133	-	254	171
Deputy Minister of Health Services	419	-	394	342
Deputy Minister of Social Services	582	-	678	382
Associate Deputy Minister	1,136	-	1,039	1,177
Regional Service Delivery	24,595	-	22,765	26,760
Assistant Deputy Minister, Planning Secretariat	2,908	-	2,338	2,994
Management Audit	1,538	-	792	771
Assistant Deputy Minister Operations Support	664	-	193	178
Financial Services	6,605	-	6,386	4,120
Administrative Services	6,358	-	6,701	6,161
Public Communications	1,449	-	919	1,089
Information Systems Services	6,148	-	4,378	3,889
Legal Services	44	-	74	37
Personnel Services	4,225	-	4,154	4,177
TOTAL VOTE 1	**57,131**	**-**	**51,359**	**52,638**
VOTE 2 - SOCIAL ALLOWANCE (Sub-Programs)				
Program Support	2,668	-	2,667	2,528
Regional Service Delivery	16,829	-	17,395	12,877
Social Allowance for Aged	19,696	-	17,693	16,718
Social Allowance - Single Parent Families	216,342	-	156,775	156,713
Social Allowance - Physically Handicapped	68,585	-	54,646	50,654
Social Allowance - Mentally Handicapped	11,849	-	10,092	9,183
Social Allowance - Employables	120,186	-	94,861	85,086
Social Allowance - Special Groups	16,297	-	12,805	14,045
TOTAL VOTE 2	**472,452**	**-**	**366,934**	**347,804**
VOTE 3 - CHILD WELFARE SERVICES (Sub-Programs)				
Program Support	718	-	658	639
Regional Service Delivery	21,172	-	24,663	19,663
Community and Family Services	45,687	-	39,521	43,940
Contracted Residences	40,168	-	34,687	33,126
Residence & Treatment in Institutions	24,492	-	23,953	22,255
TOTAL VOTE 3	**132,237**	**-**	**123,482**	**119,816**
VOTE 4 - SPECIALIZED SOCIAL SERVICES (Sub-Programs)				
Guardianship Dependent Adults	3,261	-	3,285	2,550
Senior Citizens	764	-	639	654
Family Relations Program	3,023	-	3,188	2,938
Purchased Services & Agency Grants for Adults	3,500	-	3,134	2,664
Residential Accommodations in Institutions & Hostels for Adults	4,825	-	4,156	3,970
TOTAL VOTE 4	**15,373**	**-**	**14,402**	**12,776**

	1983/84 BUDGET ESTIMATES	1983/84 SPECIAL WARRANTS	EXPENDITURES FOR THE YEARS ENDING MARCH 31 1984 (a)	1983 (b)
VOTE 5 - BENEFITS & INCOME SUPPORT (Sub-Programs)				
Regional Service Delivery	1,846	-	1,906	1,329
Senior Citizens Supplementary Benefits	70,558	-	61,447	64,524
Allowances and Benefits	70,639	-	72,763	59,694
Day Care	14,786	-	17,084	13,731
Widows' Supplementary Allowance	10,500	-	7,306	1,545
TOTAL VOTE 5	**168,329**	**-**	**160,506**	**140,823**
VOTE 6 - VOCATIONAL REHABILITATION SERVICES (Sub-Programs)				
Program Support	399	-	426	451
Regional Delivery Services	2,587	-	2,868	2,495
Purchased Services & Agency Grants	17,661	-	13,935	15,249
TOTAL VOTE 6	**20,647**	**-**	**17,229**	**18,195**
VOTE 7 - SERVICES FOR THE HANDICAPPED (Sub-Programs)				
Program Support	1,416	-	893	1,204
Community Development & Referral	2,497	-	2,296	2,583
Purchased Services & Agency Grants	30,531	-	27,029	23,887
Residence & Treatment in Institutions	71,442	-	76,772	70,527
TOTAL VOTE 7	**105,886**	**-**	**106,990**	**98,201**
VOTE 8 - TREATMENT OF MENTAL ILLNESS (Sub-Programs)				
Program Development & Support	3,699	-	3,045	3,226
Regional Service Delivery	13,303	-	14,033	12,091
Purchased Services & Agency Grants	6,745	-	6,486	5,676
Residence & Treatment in Geriatric Institutions	15,710	-	17,257	15,819
TOTAL VOTE 8	**39,457**	**-**	**40,821**	**36,812**
VOTE 9 - GENERAL HEALTH SERVICES (Sub-Programs)				
Program Development & Support	3,055	163	3,016	2,808
Communicable Disease Control	5,872	-	5,794	5,491
Funding Provincial Health Laboratory	8,573	-	8,573	8,122
Rehabilitative & Special Health Services	27,065	10,212	37,428	28,716
Vital Statistics	1,555	-	1,647	1,449
TOTAL VOTE 9	**46,120**	**10,375**	**56,458**	**46,586**
VOTE 10 - COMMUNITY SOCIAL & HEALTH SERVICES (Sub-Programs)				
Program Development & Support	1,382	-	1,094	1,969
Regional Service Delivery	1,205	-	1,141	1,309
Community Health Services	3,202	-	2,946	2,916
Funding of Community Social Services	24,806	-	22,869	21,732
Funding of Local Health Services	81,844	-	81,745	79,795
Day Care	19,289	1,000	21,690	18,321
TOTAL VOTE 10	**131,728**	**1,000**	**131,485**	**126,042**
TOTAL DEPARTMENT	**1,169,369**	**11,375**	**1,099,899**	**997,099**

REVENUE FOR THE YEAR ENDED MARCH 1984

	1983/84 (a)	1982/83 (b)
GOVERNMENT OF CANADA		
Canada Assistance Plan	316,096,361	301,670,546
Extended Health Care	88,317,000	76,734,000
Child Welfare Special Allowance	2,435,835	2,303,616
Rehabilitation of Disabled Persons	4,390,585	16,121,611
Other	77,694	523,611
	411,317,475	**397,353,384**
MAINTENANCE CHARGES	3,678,767	4,441,721
VITAL STATISTICS	642,202	647,316
OTHER FEES AND PERMITS	288,336	391,689
REFUNDS		
Previous Year's Refunds	2,071,199	6,231,873
Services and Supplies to Staff	49,959	61,456
Child Welfare Reimbursements	3,562,368	4,473,623
Public Assistance Reimbursement	5,983,098	2,695,537
Other Expenditures	11,387	11,949
OTHER	580,085	1,606,301
TOTAL OTHER REVENUE	**16,867,401**	**20,561,465**
TOTAL DEPARTMENT	**428,184,876**	**417,914,849**

a) Preliminary - not audited
b) Audited and comparable to 1982/83 Estimates

Personnel Placement Team

During the past year, the Personnel Placement Team concluded notice to and/or placement of employees whose positions were affected by decentralization. Within the 1983-84 fiscal year, 124 positions were affected by decentralization, including 11 vacant positions. The remaining group of 113 incumbered positions comprised 56 employees who accepted transfer to the regions and 57 who declined transfer. Within the latter group, placement was achieved for 55 of 57 employees.

Approximately mid-way during the 1983-84 fiscal year, the Personnel Placement Team's mandate was expanded to assist individuals affected by downsizing and/or redeployment.

In response to the Budget, which announced a 2.5 per cent cutback within the government, the Department identified 168 positions for abolishment. Of these 168 positions (eight management, 100 professional, and 60 clerical), 81 (two management, 30 professional, and 49 clerical) were occupied. As of March 31, 1984, alternate employment had been located for 39 individuals and the team continues to work with the remaining 42 individuals.

Occupational Health and Safety

There were 457 accidents during the 1983-84 fiscal year, most of which caused time lost from work beyond the day of the accident. This resulted in a total of 4,854 days lost from work due to disability. The days lost represent a 22 per cent decrease over 1982-83. The major cause of lost time injuries continues to be back injuries caused by lifting or handling residents. Priority has been placed on the Back Care Program to reduce the incidence of back injury.

Salary Administration

Salary Administration experienced an increase in consulting and problem solving requests. This unit was also involved with position renumbering, reorganization, position control activities, and file room changes.

Staff Development

During 1983-84, 2,948 employees attended 6,055 training and development activities. In addition, 50 employees were provided with assistance in the form of education leave and departmental bursaries to further professional training for service in the child welfare field.

In January 1984, the Child Care Counsellor Training program was transferred to Staff Development. The program provided 185 training days in core workshop areas. An additional 45 days were provided for orientation seminars and agency specific training.

The Multi Regional Resource Groups provided training to 143 participants, including child welfare workers, supervisors and managers. In addition, a Child Protection Services supervision course was attended by 86 employees. The Staff Development unit completed a major organizational review resulting in consolidation of the Multi Regional Resource Groups in headquarters and the establishment of a Provincial Staff Development Committee with responsibility for identification of multi regional and provincial training needs.

Staff Development streamlined the application process for course attendance and new procedures were developed and implemented by the regions.

Organizational Resources

With the regional structure completed, this section established and recruited for vacant positions in the Regions, particularly for support areas which were last to be decentralized. Other priorities were ongoing training, consultation and support to the regional personnel.

Recruitment and Selection

There were 1,575 positions filled: 815 commencements and 760 transfers (promotions, demotions and lateral transfers). A Ministerial Recruitment Review process was developed and implemented to facilitate downsizing. This resulted in a shift in recruitment activity from external recruitment to more use of departmental competitions and exemption processes. There were 273 positions filled through exemption.

Classification

Due to Department decentralization and other organization changes announced during the fiscal year, major classification reviews were carried out for Headquarters. A significant change for Classifications was the delegation of Bargaining Unit classification authority to the Department from the Personnel Administration Office. There were 1,926 bargaining unit and 290 management classification and sub-level decisions finalized during 1983-84.

A number of staffing specialists were cross-trained in the classification function through temporary

secondments to establish a staffing/classification service for Headquarters and non-decentralized managers

Information Systems Services

The direction for designing integrated information systems utilizing Data Base technology was set with the approval of a five-year EDP Strategic Plan in 1983-84. The plan supports departmental objectives of increasing productivity, controlling expenditures and improved efficiency of delivery of services. Since this is a long-term strategy, the results and the benefits will be apparent in future years; however, during 1983-84, a number of EDP projects were completed throughout the department to provide immediate assistance.

Highlights

- Two new computer systems were implemented to support the administration of Alberta Aids to Daily Living and Alberta Widows' Pension programs.
- Implemented Income Security Systems on the Remote Data Entry Network. Training of work site staff commenced in 1983 and the project is scheduled to be completed in May 1984.
- The ongoing EDP Cost Reduction Project to reduce EDP expenditures continued. The result of this project was the reduction of $1.2 million in the annual EDP budget.
- A pilot project to assess the viability of Electronic Mail (PROFS) at District Office level was completed. All district offices are scheduled to be connected to the Electronic Mail Network in 1984-85.
- A prototype to convert the existing Child Welfare Information System to an on-line system was completed. This will assist the Child Welfare workers by providing instant and up-to-date information on children in the system.

Public Communications Services

Public Communications provides public relations counsel and communications services to the various divisions in the Department. Drawing on the resources of the Public Affairs Bureau, this unit plans, executes and monitors public information and advertising programs. It also is the coordinating and production centre for the Department's publication and audio-visual needs.

Public Communications works with individual program staff in developing supportive communications campaigns, as well as providing assistance to the Regions, district offices, local health authorities, and the various community agencies operated and funded by the Department.

A suboffice was maintained in Red Deer to provide communication services to Michener Centre and to the Office of the Public Guardian.

Some of the major programs involving Public Communications included the initiation of a monthly newspaper for employees, "The News"; changes in application procedure for Extended Health benefits; special public awareness undertakings for social hygiene; Immunization Awareness Month; Dental Health Month; foster parent recruitment; and others.

As in previous years, Public Communications processed a heavy volume of print material for distribution to the public by local health authorities, departmental region and district offices as well as at special functions and public events.

Legal Services

The Department of the Attorney General provides Alberta Social Services and Community Health with legal services by assigning four solicitors to the Department. These solicitors provided legal advice to all divisions of the Department and were responsible for all legal matters.

APPEAL AND ADVISORY SECRETARIAT

The Appeal and Advisory Secretariat reports directly to the Office of the Minister and its mandate is as follows:

A. The Development and maintenance of an efficient and effective system of citizen appeal and advisory committees, councils and task forces, whose function is to strengthen the support to the government and the Department through their liaison with the Minister.

B. The prevision of resources necessary to facilitate and enhance the neutrality and impartiality of the committees as they advise the Minister and make decisions in keeping with their respective mandates.

C. The management of budgets, including grants and contracts, in connection with the committees and their respective mandates.

More than 400 citizens throughout Alberta sit on various boards and committees of the Department. The boards are concerned with social, health and program delivery issues. A description of the boards and committees with which the Secretariat worked with in 1983-84 follows:

Social Care Facilities Review Committee.

Visit facilities operated or funded by the Department and investigate complaints about facility care and treatment and standards of accommodation.

Advisory Councils.

Advise on a variety of legislative programs in terms of operation, special studies and grants and public opinion, e.g. senior citizens, day care, suicide prevention, Public Guardian, mental health research, family planning, and health services (Community Resource Centre).

Task Forces.

Carry out specific tasks with a view to encouraging public input, e.g. Review of the Mental Health Act.

Citizens Appeal Boards and Panels.

Consider appeals from persons on delivery questions or specific case decisions, e.g. social allowance, Assured Income for the Severely Handicapped, mental health review, dependent adults and Widows' Pension.

Citizens Resource Centre and Advisory Board.

Advise on the operation and services available to handicapped persons in southwest Alberta, and serve as a referral agency for clients.

Community Resource Centre and Advisory Board.

Advise on the operation and service to handicapped persons in southeast Alberta and provide coordination of service agencies.

Appeal Boards.

Ad Hoc Appeal Boards established under the Social Care Facilities Licensing Act to process appeals pertaining to facilities licensing decisions.

Child Welfare Commission

Consider appeals from persons affected by the decision of the Director, a child welfare worker or an employee in the Department on any matter under the Child Welfare Act.

APPENDIX

ACTS ADMINISTERED BY THE DEPARTMENT

Assured Income For The Severely Handicapped Act
Blind Persons' Rights Act
Change of Name Act
Child Welfare Act
Department of Social Services and Community Health Act
Dependent Adults Act
Emergency Medical Aid Act
Family and Community Support Services Act
Health Unit Act
Human Tissue Gift Act
Maintenance and Recovery Act
Marriage Act
Medical Services Research Foundation Act
Mental Health Act
Nursing Service Act
Public Health Act
Senior Citizens Benefits Act
Social Care Facilities Licensing Act
Social Care Facilities Review Committee Act
Social Development Act
The Supplementary Allowances Act
Treatment Services Act
Tuberculosis Act
Venereal Diseases Prevention Act
Vital Statistics Act
Widows' Pension Act

POOR

QUALITY

ORIGINAL